

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.G.		7/15/99
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	S.S. II	69134 II	1-7-00 2-16-00

9/4/52, 135
 Recanned for
 And purposes

Same

BEST AVAILABLE COPY

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
✗	Allowed	I	Interference
—	(Through numeral)... Canceled	A	Appeal
+	Restricted	O	Objected

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	N
14	N
15	N
16	N
17	N
18	N
19	N
20	N
21	N
22	N
23	N
24	N
25	N
26	N
27	N
28	N
29	N
30	N
31	N
32	N
33	N
34	N
35	N
36	N
37	N
38	N
39	N
40	N
41	N
42	N
43	N
44	N
45	N
46	N
47	N
48	N
49	N
50	N

Claim	Date
Final	
Original	
51	✓
52	✓
53	✓
54	✓
55	✓
56	✓
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Claim	Date
Final	
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If more than 150 claims or 10 actions
 staple additional sheet here

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